

United States Bankruptcy Court Northern District of Illinois							Voluntary Petition		
Name of Debtor (if individual, enter Last, First, Middle): Green, Stacey N				Name of Joint Debtor (Spouse) (Last, First, Middle):					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):					
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 4683				Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):					
Street Address of Debtor (No. & Street, City, State & Zip Code): 1867 Michigan City Rd Apt 3E Calumet City, IL				Street Address of Joint Debtor (No. & Street, City, State & Zip Code):					
ZIPCODE 60409-3837				ZIPCODE					
County of Residence or of the Principal Place of Business: Cook				County of Residence or of the Principal Place of Business:					
Mailing Address of Debtor (if different from street address)				Mailing Address of Joint Debtor (if different from street address):					
ZIPCODE				ZIPCODE					
Location of Principal Assets of Business Debtor (if different from street address above):									
ZIPCODE									
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) _____			Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other _____ Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).			Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding _____ Nature of Debts (Check one box.) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts.			
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. ----- Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).				
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.									THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000									
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1 million to \$10 million <input type="checkbox"/> \$10 million to \$50 million <input type="checkbox"/> \$50 million to \$100 million <input type="checkbox"/> \$100 million to \$500 million <input type="checkbox"/> \$500,000 to \$1 billion <input type="checkbox"/> More than \$1 billion									
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1 million to \$10 million <input type="checkbox"/> \$10 million to \$50 million <input type="checkbox"/> \$50 million to \$100 million <input type="checkbox"/> \$100 million to \$500 million <input type="checkbox"/> \$500,000 to \$1 billion <input type="checkbox"/> More than \$1 billion									

Voluntary Petition (This page must be completed and filed in every case)		Name of Debtor(s): Green, Stacey N	
Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet)			
Location Where Filed: None		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: None		Case Number:	Date Filed:
District:		Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code. X /s/ Derek V Lofland 2/11/09 Signature of Attorney for Debtor(s) Date	
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached a made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box.) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) _____ (Name of landlord or lessor that obtained judgment) _____ (Address of landlord or lessor) <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Green, Stacey N

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Stacey N Green

Signature of Debtor

Stacey N Green

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

February 11, 2009

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Attorney*

X /s/ Derek V Lofland

Signature of Attorney for Debtor(s)

Derek V Lofland 6280490

Gleason & Gleason

77 W Washington, Ste 1218

Chicago, IL 60602

(312) 578-9530 Fax: (312) 578-9524

derek@chicagobk.com

February 11, 2009

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

B201 (12/08)

UNITED STATES BANKRUPTCY COURT

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X _____
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Green, Stacey N
Printed Name(s) of Debtor(s)

X /s/ Stacey N Green
Signature of Debtor

2/11/2009
Date

Case No. (if known) _____

X _____
Signature of Joint Debtor (if any)

Date

IN RE Green, Stacey N

Case No. _____

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash on Hand		50.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking account w/ Chase Bank		5.00
		Checking Account w/ Chase Bank		145.00
		Checking account w/ Chase Bank		245.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, include audio, video, and computer equipment.		Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.		1,000.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books, Pictures, and other art objects, antiques, stamp, coin, record, tape, compact disc, and other colletions or collectibles		250.00
6. Wearing apparel.		Used Clothing		250.00
7. Furs and jewelry.		Misc Costume Jewelry		75.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Whole life thru NY Life - no cash value		500.00
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401(k) with current employer - 100% Exempt		450.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			

IN RE Green, Stacey N

Case No. _____

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2006 Toyota Corolla		6,500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			

IN RE Green, Stacey N

Debtor(s)

Case No. _____

(If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
TOTAL				9,470.00

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:
 (Check one box)

☐ 11 U.S.C. § 522(b)(2)
 ☒ 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE A - REAL PROPERTY			
Condo Residence at: 1867 Michigan City Rd Apt 3E, Calumet City, IL 60409-3837	735 ILCS 5 §12-901	15,000.00	80,000.00
SCHEDULE B - PERSONAL PROPERTY			
Cash on Hand	735 ILCS 5 §12-1001(b)	50.00	50.00
Checking account w/ Chase Bank	735 ILCS 5 §12-1001(b)	5.00	5.00
Checking Account w/ Chase Bank	735 ILCS 5 §12-1001(b)	145.00	145.00
Checking account w/ Chase Bank	735 ILCS 5 §12-1001(b)	245.00	245.00
Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances.	735 ILCS 5 §12-1001(b)	1,000.00	1,000.00
Books, Pictures, and other art objects, antiques, stamp, coin, record, tape, compact disc, and other colletions or collectibles	735 ILCS 5 §12-1001(b)	250.00	250.00
Used Clothing	735 ILCS 5 §12-1001(a)	250.00	250.00
Misc Costume Jewelry	735 ILCS 5 §12-1001(b)	75.00	75.00
Whole life thru NY Life - no cash value	735 ILCS 5 §12-1001(b)	500.00	500.00
401(k) with current employer - 100% Exempt	40 ILCS 5 §§22-230, 4-135, 6-213, 19-117	100%	450.00
2006 Toyota Corolla	735 ILCS 5 §12-1001(c)	2,400.00	6,500.00

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 1061300001140 Americas Servicing Co 7485 New Horizon Way Frederick, MD 21703-8388		Mortgage account opened 3/06 VALUE \$ 80,000.00				61,752.00	
ACCOUNT NO. 1061300001141 Americas Servicing Co 7485 New Horizon Way Frederick, MD 21703-8388		Mortgage account opened 3/06 VALUE \$ 80,000.00				15,398.00	
ACCOUNT NO. 30612bn912 Toyota Motor Credit Co 1111 W 22nd St Ste 420 Oak Brook, IL 60523-1959		Installment account opened 4/06 VALUE \$ 6,500.00				5,655.00	
ACCOUNT NO.							
		VALUE \$					
Subtotal (Total of this page)						\$ 82,805.00	\$
Total (Use only on last page)						\$ 82,805.00	\$

0 continuation sheets attached

(Report also on
Summary of
Schedules.)

(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

- ☐ **Domestic Support Obligations**
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
- ☐ **Extensions of credit in an involuntary case**
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
- ☐ **Wages, salaries, and commissions**
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
- ☐ **Contributions to employee benefit plans**
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
- ☐ **Certain farmers and fishermen**
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
- ☐ **Deposits by individuals**
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
- ☐ **Taxes and Certain Other Debts Owed to Governmental Units**
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
- ☐ **Commitments to Maintain the Capital of an Insured Depository Institution**
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
- ☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4018 Americash Loan 880 Lee St Ste 302 Des Plaines, IL 60016-6487		Payday Loan				400.00
ACCOUNT NO. 2604878691002 Bally Total Fitness 12440 Imperial Hwy # 30 Norwalk, CA 90650-3177		Installment account opened 11/07				354.00
ACCOUNT NO. 486236251640 Cap One PO Box 85520 Richmond, VA 23285-5520		Revolving account opened 12/04				3,813.00
ACCOUNT NO. Blatt Hasenmiller Leibsker Moore 125 S Wacker Dr Ste 400 Chicago, IL 60606-4424		Assignee or other notification for: Cap One				

3 continuation sheets attached						Subtotal (Total of this page)	\$ 4,567.00
(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						Total	\$

IN RE Green, Stacey N

Debtor(s)

Case No. _____

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 438864171750 Cap One PO Box 85520 Richmond, VA 23285-5520		Revolving account opened 4/00				2,559.00
ACCOUNT NO. 438864187894 Cap One PO Box 85520 Richmond, VA 23285-5520		Revolving account opened 3/01				1,924.00
ACCOUNT NO. xxx-xx-4683 Chase Attn: Bankruptcy Dept PO Box 100018 Kennesaw, GA 30156-9204		Credit Card or Credit Use				4,500.00
ACCOUNT NO. 3468046 Citibank Stu 701 E 60th St N Sioux Falls, SD 57104-0432		Installment account opened 6/04				10,494.00
ACCOUNT NO. 3468046 Citibank Stu 701 E 60th St N Sioux Falls, SD 57104-0432		Installment account opened 6/04				3,617.00
ACCOUNT NO. 10337953 Collection Company Of 700 Longwater Dr Norwell, MA 02061-1624		Open account opened 7/08				1,329.00
ACCOUNT NO. At T		Assignee or other notification for: Collection Company Of				

Sheet no. 1 of 3 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **24,423.00**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)
Total
\$

IN RE Green, Stacey N

Debtor(s)

Case No. _____

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4380377872920 Dsnb Macys 9111 Duke Blvd Mason, OH 45040-8999		Revolving account opened 12/06				364.00
ACCOUNT NO. 1600380559 Hfc - Usa PO Box 1547 Chesapeake, VA 23327-1547		Open account opened 3/06				5,940.00
ACCOUNT NO. 5049941371488666 Lvnv Funding Llc PO Box 740281 Houston, TX 77274-0281		Open account opened 3/08				831.00
ACCOUNT NO. Sears Sears Premier Card		Assignee or other notification for: Lvnv Funding Llc				
ACCOUNT NO. 6008892486326925 Lvnv Funding Llc PO Box 740281 Houston, TX 77274-0281		Open account opened 12/07				607.00
ACCOUNT NO. Ge Capital Jc Penney Consumer		Assignee or other notification for: Lvnv Funding Llc				
ACCOUNT NO. 3HK71106 Mci Corporate Office 22001 Loudoun County Pkwy Ashburn, VA 20147-6105		Utility or Cellular Service				219.01

Sheet no. 2 of 3 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **7,961.01**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)
Total
\$

IN RE Green, Stacey N

Debtor(s)

Case No. _____

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBITOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4443252485 Quest Diagnostics PO Box 64804 Baltimore, MD 21264-4804		Medical or Dental Bill				174.50
ACCOUNT NO. Credit Collection Services 2 Wells Ave Dept 9135 Newton, MA 02459-3208		Assignee or other notification for: Quest Diagnostics				
ACCOUNT NO. 601801111268 Rogers And Hol PO Box 879 Matteson, IL 60443-0879		Revolving account opened 11/06				2,066.00
ACCOUNT NO. 5856370689746049 Wfnnb/harlem Furniture PO Box 182273 WF Columbus, OH 43218		Revolving account opened 3/06				4,120.00
ACCOUNT NO. 558278565 Wfnnb/new York And Compa 220 W Schrock Rd Westerville, OH 43081-2873		Revolving account opened 5/05				287.00
ACCOUNT NO. 1004485818 Zenith Acquisition 220 John Glenn Dr # 1 Amherst, NY 14228-2228		Open account opened 10/08				2,567.00
ACCOUNT NO. Wells Fargo Financial		Assignee or other notification for: Zenith Acquisition				

Sheet no. 3 of 3 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal
(Total of this page) \$ **9,214.50**(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)Total
\$ **46,165.51**

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Debtor's Marital Status Single	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): Daughter	AGE(S): 13
EMPLOYMENT: DEBTOR		SPOUSE
Occupation Case Manager Name of Employer The Thresholds How long employed 2 years Address of Employer 4101 N Ravenswood Ave Chicago, IL 60613-2193		

INCOME: (Estimate of average or projected monthly income at time case filed)	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly)	\$ 2,189.20	\$
2. Estimated monthly overtime	\$	\$
3. SUBTOTAL	\$ 2,189.20	
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and Social Security	\$ 207.48	\$
b. Insurance	\$ 156.20	\$
c. Union dues	\$	\$
d. Other (specify)	\$	\$
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ 363.68	
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ 1,825.52	
7. Regular income from operation of business or profession or farm (attach detailed statement)	\$	\$
8. Income from real property	\$	\$
9. Interest and dividends	\$	\$
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$ 502.00	\$
11. Social Security or other government assistance (Specify)	\$	\$
12. Pension or retirement income	\$	\$
13. Other monthly income (Specify)	\$	\$
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ 502.00	
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$ 2,327.52	
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	\$ 2,327.52	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
None

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ 738.00
a. Are real estate taxes included? Yes ___ No <input checked="" type="checkbox"/>	
b. Is property insurance included? Yes ___ No <input checked="" type="checkbox"/>	
2. Utilities:	
a. Electricity and heating fuel	\$ 125.00
b. Water and sewer	\$
c. Telephone	\$ 70.00
d. Other <u>Cell Phone</u>	\$ 100.00
<u>Cable And Internet</u>	\$ 75.00
3. Home maintenance (repairs and upkeep)	\$
4. Food	\$ 250.00
5. Clothing	\$ 50.00
6. Laundry and dry cleaning	\$ 35.00
7. Medical and dental expenses	\$ 25.00
8. Transportation (not including car payments)	\$ 125.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ 15.00
10. Charitable contributions	\$
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$
b. Life	\$ 56.40
c. Health	\$
d. Auto	\$ 115.00
e. Other _____	\$
12. Taxes (not deducted from wages or included in home mortgage payments)	
(Specify) _____	\$
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ 195.00
b. Other <u>Second Mortgage</u>	\$ 146.00
<u>Association Dues</u>	\$ 200.00
14. Alimony, maintenance, and support paid to others	\$
15. Payments for support of additional dependents not living at your home	\$
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$
17. Other _____	\$
_____	\$
_____	\$

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.

\$ 2,320.40

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

None

20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$ 2,327.52
b. Average monthly expenses from Line 18 above	\$ 2,320.40
c. Monthly net income (a. minus b.)	\$ 7.12

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 17 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: February 11, 2009 Signature: /s/ Stacey N Green
Stacey N Green Debtor

Date: _____ Signature: _____ (Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

IN RE:

Green, Stacey N

Debtor(s)

Case No. _____

Chapter 7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
28,000.00	2006 Income from employment
25,000.00	2007 Income from employment
2,189.20	2008 Income from employment (monthly)

2. Income other than from employment or operation of business

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a, or b., as appropriate, and c.

None ☒ a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Capital One v. Debtor 08 M1 160486	Collection	Circuit Court of Cook County	Judgment for Plaintiff

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602	12/30/2008	351.00

10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None ☐ If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
11027 S Vernon, Chicago, IL	Same	Moved 04/2006

16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None ☒ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: **February 11, 2009** Signature **/s/ Stacey N Green**
of Debtor **Stacey N Green**

Date: _____ Signature _____
of Joint Debtor
(if any)

_____ **0** continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

IN RE:

Case No. _____

Green, Stacey N

Chapter 7

Debtor(s)

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 80,000.00		
B - Personal Property	Yes	3	\$ 9,470.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 82,805.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		\$ 46,165.51	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 2,327.52
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 2,320.40
TOTAL		15	\$ 89,470.00	\$ 128,970.51	

IN RE:

Case No. _____

Green, Stacey N

Chapter 7

Debtor(s)

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 2,327.52
Average Expenses (from Schedule J, Line 18)	\$ 2,320.40
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 2,791.20

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 46,165.51
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 46,165.51

IN RE:

Green, Stacey N

Debtor(s)

Case No. _____

Chapter 7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE
WITH CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

- ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- ☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Stacey N Green

Date: February 11, 2009

IN RE:

Green, Stacey N

Case No. _____

Chapter 7

Debtor(s)

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A – Debts secured by property of the estate. (Part A must be fully completed for *EACH* debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: Americas Servicing Co	Describe Property Securing Debt: Condo Residence at: 1867 Michigan City Rd Apt 3E, Calumet
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

Property No. 2 (if necessary)	
Creditor's Name: Americas Servicing Co	Describe Property Securing Debt: Condo Residence at: 1867 Michigan City Rd Apt 3E, Calumet
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

PART B – Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name:	Describe Leased Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
Property No. 2 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

1 continuation sheets attached (if any)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date: February 11, 2009

/s/ Stacey N Green

Signature of Debtor

Signature of Joint Debtor

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION
(Continuation Sheet)

PART A – Continuation

Property No. 3	
Creditor's Name: Toyota Motor Credit Co	Describe Property Securing Debt: 2006 Toyota Corolla
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

Property No.	
Creditor's Name:	Describe Property Securing Debt:
Property will be (check one): <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

Property No.	
Creditor's Name:	Describe Property Securing Debt:
Property will be (check one): <input type="checkbox"/> Surrendered <input type="checkbox"/> Retained If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

PART B – Continuation

Property No.		
Lessor's Name:	Describe Leased Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
Property No.		
Lessor's Name:	Describe Leased Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

IN RE:

Case No. _____

Green, Stacey N

Chapter 7

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors 19

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: February 11, 2009

/s/ Stacey N Green

Debtor

Joint Debtor

Green, Stacey N
1867 Michigan City Rd Apt 3E
Calumet City, IL 60409-3837

Credit Collection Services
2 Wells Ave Dept 9135
Newton, MA 02459-3208

Zenith Acquisition
220 John Glenn Dr # 1
Amherst, NY 14228-2228

Gleason & Gleason
77 W Washington, Ste 1218
Chicago, IL 60602

Dsnb Macys
9111 Duke Blvd
Mason, OH 45040-8999

Americas Servicing Co
7485 New Horizon Way
Frederick, MD 21703-8388

Hfc - Usa
PO Box 1547
Chesapeake, VA 23327-1547

Americash Loan
880 Lee St Ste 302
Des Plaines, IL 60016-6487

Lvnv Funding Llc
PO Box 740281
Houston, TX 77274-0281

Bally Total Fitness
12440 Imperial Hwy # 30
Norwalk, CA 90650-3177

Mci
Corporate Office
22001 Loudoun County Pkwy
Ashburn, VA 20147-6105

Blatt Hasenmiller Leibsker Moore
125 S Wacker Dr Ste 400
Chicago, IL 60606-4424

Quest Diagnostics
PO Box 64804
Baltimore, MD 21264-4804

Cap One
PO Box 85520
Richmond, VA 23285-5520

Rogers And Hol
PO Box 879
Matteson, IL 60443-0879

Chase
Attn: Bankruptcy Dept
PO Box 100018
Kennesaw, GA 30156-9204

Toyota Motor Credit Co
1111 W 22nd St Ste 420
Oak Brook, IL 60523-1959

Citibank Stu
701 E 60th St N
Sioux Falls, SD 57104-0432

Wfnnb/harlem Furniture
PO Box 182273 WF
Columbus, OH 43218

Collection Company Of
700 Longwater Dr
Norwell, MA 02061-1624

Wfnnb/new York And Compa
220 W Schrock Rd
Westerville, OH 43081-2873



THE THRESHOLDS
4101 NORTH RAVENSWOOD
CHICAGO, ILLINOIS 60613

Period Ending: 11/15/2008
Pay Date: 11/14/2008

Taxable Marital Status: Single
Exemptions/Allowances:
Federal: 7
IL: 2

STACEY GREEN
1867 MICHIGAN CITY
ROAD
CALUMET CITY, IL 60409

Social Security Number: XXX-XX-4683

Earnings	rate	hours	this period	year to date
Regular	12.6300	64.00	808.32	21,156.40
Personal	12.6300	16.00	202.08	202.08
Adjust				279.15
Bonus				300.00
Holiday				670.08
Incentive				900.00
Other				460.00
Sick Pay				586.08
Vacation				1,409.36
Gross Pay			\$1,010.40	25,963.15

* Excluded from federal taxable wages
Your federal taxable wages this period are \$942.51

Deductions	Statutory		
	Social Security Tax	-58.43	1,518.56
	Medicare Tax	-13.67	355.15
	IL State Income Tax	-23.66	568.98
	Federal Income Tax		19.83
	Other		
	Checking	-1,094.48	
	Medical Plan	-67.89*	1,446.04
	Dental		24.13
	Expense Reimbur		-3,784.61
	403B		562.80
	Adjustment		
	Expense Reimbur	+247.73	
	Net Pay		\$0.00

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THE THRESHOLDS
4101 NORTH RAVENSWOOD
CHICAGO, ILLINOIS 60613

Advice number: 00000460656
Pay date: 11/14/2008

Deposited to the account of	account number	transit ABA	amount
STACEY GREEN	1110018491587	0710 0001	\$1,094.48

THIS IS NOT A CHECK

NON-NEGOTIABLE



THE THRESHOLDS
4101 NORTH RAVENSWOOD
CHICAGO, ILLINOIS 60613

Period Ending: 11/29/2008
Pay Date: 11/26/2008

Taxable Marital Status: Single
Exemptions/Allowances:
Federal: 7
IL: 2

STACEY GREEN
1867 MICHIGAN CITY
ROAD
CALUMET CITY, IL 60409

Social Security Number: XXX-XX-4683

Earnings	rate	hours	this period	year to date
Regular	12.6300	72.00	909.36	22,065.76
Sick Pay	12.6300	8.00	101.04	687.12
Adjust				279.15
Bonus				300.00
Holiday				670.08
Incentive				900.00
Other				460.00
Personal				202.08
Vacation				1,409.36
Gross Pay			\$1,010.40	26,973.55

Deductions	Statutory		
	Social Security Tax	-58.18	1,576.74
	Medicare Tax	-13.60	368.75
	IL State Income Tax	-23.53	592.51
	Federal Income Tax		19.83
	Other		
	Checking	-843.00	
	Dental	-4.20*	28.33
	Medical Plan	-67.89*	1,513.93
	Expense Reimbur		-3,784.61
	403B		562.80
	Net Pay		\$0.00

* Excluded from federal taxable wages

Your federal taxable wages this period are \$938.31

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THE THRESHOLDS
4101 NORTH RAVENSWOOD
CHICAGO, ILLINOIS 60613

Advice number: 00000480714
Pay date: 11/26/2008

Deposited to the account of STACEY GREEN
account number 1110018491587 transit ABA 0710 0001 amount \$843.00

THIS IS NOT A CHECK

NON-NEGOTIABLE



THE THRESHOLDS
4101 NORTH RAVENSWOOD
CHICAGO, ILLINOIS 60613

Period Ending: 12/13/2008
Pay Date: 12/12/2008

Taxable Marital Status: Single
Exemptions/Allowances:
Federal: 7
IL: 2

STACEY GREEN
1867 MICHIGAN CITY
ROAD
CALUMET CITY, IL 60409

Social Security Number: XXX-XX-4683

Earnings	rate	hours	this period	year to date
Regular	12.6300	72.00	909.36	22,975.12
Holiday	12.6300	8.00	101.04	771.12
Adjust				279.15
Bonus				300.00
Incentive				1,000.00
Other				460.00
Personal				202.08
Sick Pay				687.12
Vacation				1,409.36
Gross Pay			\$1,010.40	28,083.95

* Excluded from federal taxable wages
Your federal taxable wages this period are \$942.51

Deductions	Statutory		
	Social Security Tax	-58.44	1,641.38
	Medicare Tax	-13.67	383.87
	IL State Income Tax	-23.66	616.17
	Federal Income Tax		19.83
	Other		
	Checking	-1,142.44	
	Medical Plan	-67.89*	1,581.82
	Dental		28.33
	Expense Reimbur		-4,080.31
	403B		562.80
	Adjustment		
	Expense Reimbur	+295.70	
	Net Pay		\$0.00

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THE THRESHOLDS
4101 NORTH RAVENSWOOD
CHICAGO, ILLINOIS 60613

Advice number: 00000500671
Pay date: 12/12/2008

Deposited to the account of STACEY GREEN
account number 1110018491587 transit ABA 0710 0001 amount \$1,142.44

THIS IS NOT A CHECK

NON-NEGOTIABLE



THE THRESHOLDS
 4101 NORTH RAVENSWOOD
 CHICAGO, ILLINOIS 60613

Period Ending: 12/27/2008
 Pay Date: 12/23/2008

Taxable Marital Status: Single
 Exemptions/Allowances:
 Federal: 7
 IL: 2

STACEY GREEN
 1867 MICHIGAN CITY
 ROAD
 CALUMET CITY, IL 60409

Social Security Number: XXX-XX-4683

Earnings	rate	hours	this period	year to date
Regular	12.6300	72.00	909.36	23,884.48
Sick Pay	12.6300	8.00	101.04	788.16
Adjust				279.15
Bonus				300.00
Holiday				771.12
Incentive				1,000.00
Other				460.00
Personal				202.08
Vacation				1,409.36
Gross Pay			\$1,010.40	29,094.35

Deductions	Statutory		
	Social Security Tax	-58.17	1,699.55
	Medicare Tax	-13.61	397.48
	IL State Income Tax	-23.53	639.70
	Federal Income Tax		19.83
	Other		
	Checking	-843.00	
	Dental	-4.20*	32.53
	Medical Plan	-67.89*	1,649.71
	Expense Reimbur		-4,080.31
	403B		562.80
	Net Pay		\$0.00

* Excluded from federal taxable wages
 Your federal taxable wages this period are \$938.31

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THE THRESHOLDS
 4101 NORTH RAVENSWOOD
 CHICAGO, ILLINOIS 60613

Advice number: 00000520577
 Pay date: 12/23/2008

Deposited to the account of	account number	transit ABA	amount
STACEY GREEN	1110018491587	0710 0001	\$843.00

THIS IS NOT A CHECK

NON-NEGOTIABLE

1040 U.S. Individual Income Tax Return 2007

Label Your first name and initial STACEY Last name GREEN		For the year Jan. 1-Dec. 31, 2007, or other tax year beginning 2007, ending 2007	
If a joint return, spouse's first name and initial Last name		Your social security number 346-83-4683 Spouse's social security number	
Home address (number and street). If you have a P.O. box 1867 MICHIGAN CITY RD UNIT3E Apt. no.		City, town or post office, state, and ZIP code. If you have a foreign address Calumet City IL 60409-0000	
Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund		Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse	
Filing Status 1 <input type="checkbox"/> Single 2 <input checked="" type="checkbox"/> Married filing jointly, even if only one had income 3 <input type="checkbox"/> Married filing separately (other returns must be filed)			
Dependents If you are claiming a dependent, check the box that applies. Do not check box 8a or 8b if the dependent is a child.			
(1) First name MAKINE TEMPLE		(2) Dependent's social security number 333-92-3667	(3) Dependent's relationship to you DAUGHTER
			(4) X if qualifying child for child tax credit (see page 19.) <input checked="" type="checkbox"/>
			<input type="checkbox"/> If you did not live with you due to divorce or separation (see instructions)
			Dependents on 8c not entered above
Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a W-2, see instructions. Enclose, but do not attach, any payment. Also, please use Form 1040-V.			
d Total number of exemptions claimed		Add numbers on lines above	
7 Wages, salaries, tips, etc. Attach Form(s) W-2		7 24662	
8a Taxable interest. Attach Schedule B if required		8a	
b Tax-exempt interest. Do not include on line 8a		8b	
9a Ordinary dividends. Attach Schedule B if required		9a	
b Qualified dividends		9b	
10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions)		10	
11 Alimony received		11	
12 Business income or (loss). Attach Schedule C or C-EZ		12	
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>		13	
14 Other gains or (losses). Attach Form 4797		14	
15a IRA distributions		15a	
16a Pensions and annuities		16a	
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	
18 Farm income or (loss). Attach Schedule F		18	
19 Unemployment compensation		19	
20a Social security benefits		20a	
21 Other income. List type and amount		21	
22 Add the amounts in the far right column for lines 7 through 21. This is your total income		22 24662	
23 Educator expenses		23	
24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ		24	
25 Health savings account deduction. Attach Form 8889		25	
26 Moving expenses. Attach Form 3903		26	
27 One-half of self-employment tax. Attach Schedule SE		27	
28 Self-employed SEP, SIMPLE, and qualified plans		28	
29 Self-employed health insurance deduction		29	
30 Penalty on early withdrawal of savings		30	
31a Alimony paid b Recipient's SSN		31a	
32 IRA deduction		32	
33 Student loan interest deduction		33	
34 Tuition and fees deduction. Attach Form 8917		34	
35 Domestic production activities deduction. Attach Form 8903		35	
36 Add lines 23 through 31a and 32 through 35		36	
37 Subtract line 36 from line 22. This is your adjusted gross income		37 24662	

38 Amount from line 37 (adjusted gross income) 38 24662

39a Check if: ☐ You were born before January 2, 1943 ☐ Spouse was born before January 2, 1943 ☐ Blind ☒ Total boxes checked 39a

b If your spouse itemizes on a separate return or you were a dual-status alien, check here 39b ☐

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40 10891

41 Subtract line 40 from line 38 41 13771

42 If line 38 is over \$117,300 or less, multiple \$3,400 by the total number of exemption claimed on line 6d. If line 38 is over \$117,300 42 6800

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43 6971

44 Tax. Check if any tax is from Form(s): a ☐ 8814 b ☐ 4972 c ☐ 8889 44 698

45 Alternative minimum tax. Attach Form 6251 45

46 Add lines 44 and 45 46 698

47 Credit for child and dependent care expenses. Attach Form 2441 47

48 Credit for the elderly or the disabled. Attach Schedule R 48

49 Education credits. Attach Form 8863 49

50 Research and development credits. Attach Form 5885 50

51 Energy-related credits. Attach Form 5695 51

52 Other credits. a ☐ Form 8829 b ☐ Form 8827 c ☐ Form 8828 52

53 Add lines 47 through 52. These are your total credits 53

54 Subtract line 53 from line 46. If line 53 is more than line 46, enter -0- 54

55 Self-employment tax. Attach Schedule SE 55

56 Unreported social security and Medicare tax from: a ☐ Form 4137 b ☐ Form 8919 56

57 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 57

58 Advance earned income credit payments from Form(s) W-2, box 9 58

59 Household employment taxes. Attach Schedule H 59

60 Add lines 57 through 62. This is your total tax 60

61 Federal income tax withheld from Forms W-2 and 1099 61

62 2007 estimated tax payments and amount applied from 2006 return 62

63 Earned income credit (EIC) 63

64a Nontaxable combat pay election 64a 1369

64b Excess social security and tier 1 RRTA tax withheld 64b

65 Additional child tax credit. Attach Form 8812 65 302

66 Amount paid with request for extension to file 66

67 Payments from: a ☐ Form 2439 b ☐ Form 4136 c ☐ Form 8885 67

68 Refundable credit for prior year minimum tax from Form 8801, line 27 68

69 Add lines 64, 65, 66a, and 67 through 71. These are your total payments 69

70 If line 72 is more than line 69, subtract line 69 from line 72. This is the amount you overpaid 70

71a Amount of line 70 you want refunded to you. If Form 8888 is attached check here 71a

71b Routing number XXXXXX 71b

71c Type ☐ Checking ☐ Savings 71c

71d Account number XXXXXXXXXXXXXXXX 71d

72 Amount of line 70 you want applied to your 2008 estimated tax 72

73 Amount you owe. Subtract line 72 from line 69 73

74 Estimated tax penalty 74

Do you want to allow another person to discuss this return with the IRS? ☐ Yes. Complete the following. ☒ No

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature _____ Date _____ Your occupation _____ Daytime phone number (708) 985-6543

Spouse's signature. If a joint return, both must sign. _____ Date _____ Spouse's occupation _____

Preparer's signature _____ Date 1/15/2008 Check if self-employed ☒ Preparer's SSN or PTIN P00640312

Firm's name (or yours if self-employed), address, and ZIP code KERRY VAN ISOM & ASSOCIATES EIN 36-4012050

1739 E 87TH ST CHICAGO IL 60617-0000 Phone no. (773) 374-7600

Tax and Credits

Standard Deduction for:

• People who checked any box on line 39a or 39b or who can be claimed as a dependent.

• All others: Single or Married filing separately, \$5,350

Married filing jointly or Qualifying widow(er) with dependent child, \$7,500

38 Amount from line 37 (adjusted gross income) 38 2

39a Check if: ☐ You were born before January 2, 1943, ☐ Blind. ☐ Spouse was born before January 2, 1943, ☐ Blind. Total boxes checked 39a 2

b If your spouse itemizes on a separate return or you were a dual-status alien, check here 39b ☐

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40 2

41 Subtract line 40 from line 38 41 2

42 If line 38 is over \$117,300 or less, multiple \$3,400 by the total number of exemption claimed on line 6d. If line 38 is over \$117,300 42 2

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter 0 43 2

44 Tax. Check if any tax is from Form(s): a ☐ 8814 b ☐ 4872 c ☐ 8885 44 2

45 Alternative minimum tax. Attach Form 6251 45 2

46 Add lines 44 and 45 46 2

47 Credit for child and dependent care expenses. Attach Form 2441 47 2

48 Credit for the elderly or the disabled. Attach Form 2073 48 2

49 Education credits. Attach Form 8863 49 2

50 Research credit. Attach Form 8869 50 2

Other Taxes

56 Self-employment tax. Attach Schedule SE 56 2

57 Unreported social security and Medicare tax from: a ☐ Form 4137 b ☐ 781 57 2

60 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 60 2

61 Advance earned income credit payments from Form(s) W-2, box 9 61 2

62 Household employment taxes. Attach Schedule H 62 2

63 Add lines 57 through 62. This is your total tax 63 2

Payments

If you have a qualifying child, attach Schedule EIC.

64 Federal income tax withheld from Forms W-2 and 1099 64 2

65 2007 estimated tax payments and amount applied from 2006 return 65 2

66a Earned income credit (EIC) 66a 1369

b Nontaxable combat pay election 66b ☐

67 Excess social security and tier 1 RRTA tax withheld 67 2

68 Additional child tax credit. Attach Form 8812 68 2

69 Amount paid with request for extension to file 69 2

70 Payments from: a ☐ Form 2439 b ☐ Form 4136 c ☐ Form 8885 70 2

71 Refundable credit for prior year minimum tax from Form 8801, line 27 71 2

72 Add lines 64, 65, 66a, and 67 through 71. These are your total payments 72 1671

73 If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid 73 1671

74a Amount of line 73 you want refunded to you. If Form 8888 is attached check here ☐ 74a 1671

Refund

Direct deposit: ☐ Yes ☐ No

File as 74b, 74c, and 74d, or Form 8888

a Routing number: XXXXXXXXXX

b Account number: XXXXXXXXXXXXXXXXXXXX

c Type: ☐ Checking ☐ Savings

Amount You Owe

75 Amount of line 73 you want applied to your 2008 estimated tax 75 2

76 Amount you owe. Subtract line 72 from line 63 76 2

77 Estimated tax penalty 77 2

Third Party Designee

Designee's name _____ Phone no. _____

☐ Yes. Complete the following. ☐ No

Sign Here

Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature _____ Date _____ Your occupation _____ Daytime phone number (708) 985-6543

Spouse's signature. If a joint return, both must sign. _____ Date _____ Spouse's occupation _____

Paid Preparer's Use Only

Preparer's signature _____ Date 1/15/2008

Firm's name (or yours if self-employed), address, and ZIP code KERRY VAN ISOM & ASSOCIATES 1739 E 87TH ST CHICAGO IL 60617-0000

Check if self-employed ☒

Preparer's SSN or PTIN P00640312

EIN 36-4012050

Phone no. (773) 374-7600

38 Amount from line 37 (adjusted gross income): **24662**

39a Check if: ☐ You were born before January 2, 1943, ☐ Blind. ☐ Spouse was born before January 2, 1943, ☐ Blind. Total boxes checked **39a** ☐ **39b** ☐

b If your spouse itemizes on a separate return or you were a dual-status alien, check here **39a** ☐ **39b** ☐

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) **40** **10891**

41 Subtract line 40 from line 38 **41** **13771**

42 If line 38 is over \$117,300 or less, multiple \$3,400 by the total number of exemption claimed on line 6d. If line 38 is over \$117,300 **42** **6800**

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- **43** **6971**

44 Tax. Check if any tax is from Form(s): a ☐ 8814 b ☐ 4972 c ☐ 8889 **44** **698**

45 Alternative minimum tax. Attach Form 6251 **45** **698**

46 Add lines 44 and 45 **46** **698**

47 Credit for child and dependent care expenses. Attach Form 2441 **47** **698**

48 Credit for the elderly or the disabled. Attach Schedule R **48** **698**

49 Education credits. Attach Form 8863 **49** **698**

50 Residential energy credits. Attach Form 5695 **50** **698**

51 Foreign tax credit. Attach Form 1116 if required **51** **698**

52 Child tax credit. Attach Form 8901 if required **52** **698**

53 Retirement savings contributions credit. Attach Form 8880 **53** **698**

54 Credits from: a ☐ Form 8396 b ☐ Form 8859 c ☐ Form 8839 **54** **698**

55 Other credits: a ☐ Form 3800 b ☐ Form 8801 c ☐ Form **55** **698**

56 Add lines 47 through 55. These are your total credits **56** **698**

57 Subtract line 56 from line 46. If line 56 is more than line 46, enter -0- **57** **698**

58 Self-employment tax. Attach Schedule SE **58** **698**

59 Unreported social security and Medicare tax from: a ☐ Form 4137 b ☐ Form 8919 **59** **698**

60 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required **60** **698**

61 Advance earned income credit payments from Form(s) W-2, box 9 **61** **698**

62 Household employment taxes. Attach Schedule H **62** **698**

63 Add lines 57 through 62. This is your total tax **63** **698**

64 Federal income tax withheld from Forms W-2 and 1099 **64** **698**

65 2007 estimated tax payments and amount applied from 2006 return **65** **698**

66a Earned income credit (EIC) **66a** **1369**

b Nontaxable combat pay election **66b** **1369**

67 Excess social security and tier 1 RRTA tax withheld **67** **1369**

68 Additional child tax credit. Attach Form 8812 **68** **1369**

69 Amount paid with request for extension to file **69** **1369**

70 Payments from: a ☐ Form 1042S b ☐ Form 1042 c ☐ Form 1042-ES **70** **1369**

71 Refundable credit for prior year overpayment tax **71** **1369**

72 Add lines 64, 65, 66a, and 70 through 71 **72** **1369**

Standard Deduction for:

- People who checked any box on line 39a or 39b or who can be claimed as a dependent.
- All others: Single or Married filing separately, \$5,350
- Married filing jointly or Qualifying widow(er), \$10,700
- Head of household, \$7,850

Other Taxes

Payments

If you have a qualifying child, attach Schedule EIC.

Refund

Amount You Owe

Third Party Designee

Sign Here

Keep a copy for your records.

Paid Preparer's Use Only

Do you want to allow another person to discuss this return with the IRS? ☐ Yes ☒ No

Designee's name **KERRY VAN ISOM & ASSOCIATES** Phone no. **1739 E 87TH ST CHICAGO IL 60617-0000**

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature **KERRY VAN ISOM** Date **1/15/2008** Your occupation **Preparer** Daytime phone number **(708) 985-6543**

Spouse's signature. If a joint return, both must sign. **KERRY VAN ISOM** Date **1/15/2008** Spouse's occupation **Preparer**

Preparer's signature **KERRY VAN ISOM** Date **1/15/2008** Check if self-employed ☒ Preparer's SSN or PTIN **P00640312**

Firm's name (or yours if self-employed), address, and ZIP code **KERRY VAN ISOM & ASSOCIATES 1739 E 87TH ST CHICAGO IL 60617-0000** EIN **36-4012050** Phone no. **(773) 374-7600**

Form 1040 U.S. Individual Income Tax Return 2007 (99)

For the year Jan. 1-Dec. 31, 2007, or other tax year beginning 2007, ending 20 OMB No.

Label Your first name and initial STACEY Last name GREEN Your social security number 346-80-4683
If a joint return, spouse's first name and initial Last name Spouse's social security number

Home address (number and street). If you have a P.O. box 1867 MICHIGAN CITY RD UNIT3E Apt. no. City, town or post office, state, and ZIP code. If you have a foreign address Calumet City IL 60409-0000

Filing Status 1 Single 2 Married filing jointly, even if one has no income 3 Married filing separately 4 Divorced or separated (treated as married on joint return) 5 Widowed 6 Head of household

Dependents If more than four dependents, see instructions. 1 Dependent 2 Dependent 3 Dependent 4 Dependent 5 Dependent 6 Dependent 7 Dependent 8 Dependent 9 Dependent 10 Dependent 11 Dependent 12 Dependent 13 Dependent 14 Dependent 15 Dependent 16 Dependent 17 Dependent 18 Dependent 19 Dependent 20 Dependent 21 Dependent 22 Dependent 23 Dependent 24 Dependent 25 Dependent 26 Dependent 27 Dependent 28 Dependent 29 Dependent 30 Dependent 31 Dependent 32 Dependent 33 Dependent 34 Dependent 35 Dependent 36 Dependent 37 Dependent 38 Dependent 39 Dependent 40 Dependent 41 Dependent 42 Dependent 43 Dependent 44 Dependent 45 Dependent 46 Dependent 47 Dependent 48 Dependent 49 Dependent 50 Dependent 51 Dependent 52 Dependent 53 Dependent 54 Dependent 55 Dependent 56 Dependent 57 Dependent 58 Dependent 59 Dependent 60 Dependent 61 Dependent 62 Dependent 63 Dependent 64 Dependent 65 Dependent 66 Dependent 67 Dependent 68 Dependent 69 Dependent 70 Dependent 71 Dependent 72 Dependent 73 Dependent 74 Dependent 75 Dependent 76 Dependent 77 Dependent 78 Dependent 79 Dependent 80 Dependent 81 Dependent 82 Dependent 83 Dependent 84 Dependent 85 Dependent 86 Dependent 87 Dependent 88 Dependent 89 Dependent 90 Dependent 91 Dependent 92 Dependent 93 Dependent 94 Dependent 95 Dependent 96 Dependent 97 Dependent 98 Dependent 99 Dependent 100 Dependent

Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. 7 Wages, salaries, tips, etc. Attach Form(s) W-2 8a Taxable interest. Attach Schedule B if required 8b Tax-exempt interest. Do not include on line 8a 9a Ordinary dividends. Attach Schedule B if required 9b Qualified dividends 10 Taxable refunds, credits, or offsets of state and local income taxes (see instructions) 11 Alimony received 12 Business income or (loss). Attach Schedule C or C-EZ 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here 14 Other gains or (losses). Attach Form 4797

Adjusted Gross Income 15a IRA distributions 15b Rollover distributions 16a Pension or annuity payments 16b Rollover payments 17 Other income 18 Tax-exempt interest 19 Other income 20 Other income 21 Other income 22 Other income 23 Other income 24 Other income 25 Other income 26 Other income 27 Other income 28 Other income 29 Other income 30 Other income 31 Other income 32 Other income 33 Other income 34 Other income 35 Other income 36 Other income 37 Other income 38 Other income 39 Other income 40 Other income 41 Other income 42 Other income 43 Other income 44 Other income 45 Other income 46 Other income 47 Other income 48 Other income 49 Other income 50 Other income 51 Other income 52 Other income 53 Other income 54 Other income 55 Other income 56 Other income 57 Other income 58 Other income 59 Other income 60 Other income 61 Other income 62 Other income 63 Other income 64 Other income 65 Other income 66 Other income 67 Other income 68 Other income 69 Other income 70 Other income 71 Other income 72 Other income 73 Other income 74 Other income 75 Other income 76 Other income 77 Other income 78 Other income 79 Other income 80 Other income 81 Other income 82 Other income 83 Other income 84 Other income 85 Other income 86 Other income 87 Other income 88 Other income 89 Other income 90 Other income 91 Other income 92 Other income 93 Other income 94 Other income 95 Other income 96 Other income 97 Other income 98 Other income 99 Other income 100 Other income

Adjusted Gross Income 24 Certain business expenses of reservists, performing artists and fee-based government officials. Attach Form 2106 or 2106-EZ 25 Health savings account deduction. Attach Form 8889 26 Moving expenses. Attach Form 3903 27 One-half of self-employment tax. Attach Schedule SE 28 Self-employed SEP, SIMPLE, and qualified plans 29 Self-employed health insurance deduction 30 Penalty on early withdrawal of savings 31a Alimony paid b Recipient's SSN 32 IRA deduction 33 Student loan interest deduction 34 Tuition and fees deduction. Attach Form 8917 35 Domestic production activities deduction. Attach Form 8903 36 Add lines 23 through 31a and 32 through 35 37 Subtract line 36 from line 22. This is your adjusted gross income

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

IN RE:

Case No. _____

Green, Stacey N

Chapter 7

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ **676.00**

Prior to the filing of this statement I have received \$ **351.00**

Balance Due \$ **325.00**

2. The source of the compensation paid to me was: ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is: ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
 - e. [Other provisions as needed]

6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

Litigation / Adversary Proceedings
\$400.00 for Motions to Redeem
Credit Counseling Fees

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 11, 2009

Date

/s/ Derek V Lofland

Derek V Lofland 6280490
Gleason & Gleason
77 W Washington, Ste 1218
Chicago, IL 60602
(312) 578-9530 Fax: (312) 578-9524
derek@chicagobk.com

Certificate Number: 00437-ILN-CC-005767950

CERTIFICATE OF COUNSELING

I CERTIFY that on January 2, 2009, at 3:30 o'clock PM MST,

Stacey Green received from

Black Hills Children's Ranch, Inc.,

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Northern District of Illinois, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet and telephone.

Date: January 2, 2009

By /s/Shelly Kopplin

Name Shelly Kopplin

Title Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

IN RE:

Case No. _____

Green, Stacey N

Debtor(s)

Chapter 7**DECLARATION REGARDING ELECTRONIC FILING**

Signed by Debtor(s) or Corporate Representative

To Be Used When Filing over the Internet**PART I - DECLARATION OF PETITIONER**Date: **December 30, 2008****A. To be completed in all cases.**

I (We) Stacey N Green and _____, the undersigned debtor(s), corporate officer, partner, or member, hereby declare under penalty of perjury that the information I(we) have given my (our) attorney, including correct social security number(s) and the information provided in the electronically filed petition, statements, schedules, and if applicable, application to pay filing fee in installments, is true and correct. I(we) consent to my(our) attorney sending the petition, statements, schedules, and this DECLARATION to the United States Bankruptcy Court. I(we) understand that this DECLARATION must be filed with the Clerk in addition to the petition. I(we) understand that failure to file this DECLARATION will cause this case to be dismissed pursuant to 11 U.S.C. sections 707(a) and 105.

B. To be checked and applicable only if the petitioner is an individual (or individuals) whose debts are primarily consumer debts and who has (or have) chosen to file under chapter 7.

- ☒ I(we) am(are) aware that I(we) may proceed under chapter 7, 11, 12, or 13 of Title 11 United States Code; I(we) understand the relief available under each such chapter; I(we) choose to proceed under chapter 7; and I(we) request relief in accordance with chapter 7.

C. To be checked and applicable only if the petition is a corporation, partnership, or limited liability entity.

- ☐ I declare under penalty of perjury that the information provided in this petition is true and correct and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in the petition.

Signature: _____

(Debtor or Corporate Officer, Partner or Member)

Signature: _____

(Joint Debtor)